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Denise Juneau, Superintendent  
Office of Public Instruction  
PO Box 202501  
Helena, MT 59620-2501

## Local Education Agency (LEA) E-Grants Security Assignments

(Includes School Districts, Special Education Cooperatives, and  
Community-Based Organizations)

This form is submitted by the LEA Authorized Representative (AR) to

- Set up initial user accounts,
- Assign/reassign role(s) to individuals who will access the E-Grants system on behalf of the LEA, and/or
- Inactivate a user's account.

The AR may submit the form electronically (green button at the bottom of the form), by fax (406) 444-1369, or by mail. A complete description of the E-Grant roles and access is provided on page two. If you have questions regarding this form, e-mail [Egrants@mt.gov](mailto:Egrants@mt.gov). These security assignments will remain in effect until the OPI receives notice of a change.

LEA/Organization Name:

LE Number :

Mailing Address:

### Authorized Representative (all programs)

Name:

Email:

Create new account for LEA: ☐ Yes ☐ No

Phone:

If applicable, name of Authorized Representative account to inactivate:

### Business Manager (all programs)

Name:

Email:

Creat new account for Business Manager: ☐ Yes ☐ No

Phone:

If applicable, name of Business Manager account to inactivate:

☐ Check this box if you do not wish your Business Manager to receive the complete Business Manager role (data entry and financial data entry.) Please let us know what type of access you want to assign to your Business Manager. Role assignments can be found on the following page.

**Authorized Representative must sign or type information below in order to process request.**

**With my signature below (typed or written), I certify the accuracy of the information submitted on this form.**

*Signature of Authorized Representative*

*Date*

**Add additional users in the space provided below:**

***Instructions***

- Enter the full name, email address, and phone number for all individuals needing security access to E-Grants. Indicate whether the request is for a new account, a change to an existing account, or the closure of an existing account.
- If the request is for a new account or a change to an existing account, indicate the level of access needed and the program(s) for which the access should be granted. (See definitions of security roles below.)
- Note: Only the official LEA Authorized Representative will be granted the AR security role.

**LEA E-Grants Application Roles**

For Grant Applications

**Application Data Entry**

- This role can complete all application/amendments data entry and run the Consistency Check to ensure the application is ready for review and submission by the AR.

**LEA E-Grants Financial Roles**

For Cash Requests and Fiscal Close-Outs

**Data Entry**

- This role can enter the reimbursement requests and expenditure reports into E-Grants, but will not be able to submit these forms.

**Business Manager**

- This role includes application data entry as well as financial data entry and also allows entry and submission of reimbursement requests and expenditure reports to the OPI for review and approval.

**Name:**

**Email:**

**Phone:**

☐ Inactivate user's account

☐ Add/Change user's security roles [specify role and program(s)]

**Application role:** **Application Data Entry** (check all that apply)

☐ ESEA/NCLB Consolidated

☐ Title I-C: Migrant Consolidated

☐ Title IV-B: 21<sup>st</sup> Century

☐ Title IV-B: 21<sup>st</sup> Cent. Cont.

☐ Title X: Homeless Education

☐ Gift & Talented State Grant

☐ ACT Plus Writing

☐ IDEA Consolidated

☐ Carl Perkins – Secondary

☐ Striving Readers

☐ IDEA: CSPD

☐ ABLE Extension

☐ Title II-A: State Level

☐ Title I-D: Neglected & Delinq.

☐ IDEA: RTI

☐ Math Science Partnership

**Financial role:** (check one) ☐ Data Entry

(check all that apply)

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☐ Math Science Partnership

**Name:**

**Email:**

**Phone:**

- ☐ Inactivate user's account
- ☐ Add/Change user's security roles [specify role and program(s)]

**Application role: Application Data Entry** (check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> ESEA/NCLB Consolidated                   | <input type="checkbox"/> Title I-C: Migrant Consolidated | <input type="checkbox"/> Title IV-B: 21 <sup>st</sup> Century |
| <input type="checkbox"/> Title IV-B: 21 <sup>st</sup> Cent. Cont. | <input type="checkbox"/> Title X: Homeless Education     | <input type="checkbox"/> Gift & Talented State Grant          |
| <input type="checkbox"/> ACT Plus Writing                         | <input type="checkbox"/> IDEA Consolidated               | <input type="checkbox"/> Carl Perkins – Secondary             |
| <input type="checkbox"/> Striving Readers                         | <input type="checkbox"/> IDEA: CSPD                      | <input type="checkbox"/> ABLE Extension                       |
| <input type="checkbox"/> Title II-A: State Level                  | <input type="checkbox"/> Title I-D: Neglected & Delinq.  | <input type="checkbox"/> IDEA: RTI                            |
| <input type="checkbox"/> Math Science Partnership                 |  |   |

**Financial role:** (check one) ☐ Data Entry

(check all that apply)

- |   |  |   |
|---|--|---|
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| <input type="checkbox"/> Math Science Partnership                 |  |   |

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**Email:**

**Phone:**

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| <input type="checkbox"/> Math Science Partnership                 |  |   |

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(check all that apply)

- |   |  |   |
|---|--|---|
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